								Application or Docket Number					
	PATENT	APPLICATIO Effect	N FEE D	RD	10/796159								
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			37,				F	RATE FEE		7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BAS	BASIC FEE 385.00		OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			9 V minus 20=		* 12		×	X\$ 9=		OR	X\$18=	216	
INDEPĖNDENT CLAIMS			う minus 3 =		* O		×	X43=		OR	X86=	0	
ML	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT				+145=			OR	+290=	0	
* If the difference in column 1 is less than zero, enter "0" in column 2							TO	TOTAL		OR	TOTAL	916	
5	5/16/09 Column 1) (Column 2) (Column 3)							SMALL ENTITY			OTHER SMALL		
۲	1.010/	(Column 1) CLAIMS	T	(Column 2) HIGHEST		(Column 3)	1		ADDI-	OR 1		ADDI-	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	DUSLY	PRESENT EXTRA	R	ATE	TIONAL		RATE	TIONAL FEE	
	Total	.32	Minus	-3	2	20	×	\$ 9=		OR	X\$18=		
	Independent	· 3	Minus	2)	<u>- 0</u>	×	43=		OR	X86≈		
		NTATION OF MU	ULTIPLE DEF	PENDENT	CLAIM		+1	45=		OR	+290=	1	
)	4 -16							TOTAL			TOTAL		
	(Column 1) (Colum					Al nn 2) (Column,3)			<u> </u>	10	ADDIT. FEE		
		CLAIMS		HIGH	EST				ADDI-	7		ADDI-	
<u>T</u> B		REMAINING AFTER	,	NUMI PREVIC		PRESENT EXTRA	R	ATE	TIONAL		RATE	TIONAL	
EN		AMENDMENT		PAID		<u> </u>			FEE			FEE	
AMENDMENT	Total	*	Minus	**		=	X	9=		OR	X\$18=		
	Independent * FIRST PRESENTATION OF MU		Minus	***	CLAIM	-	X43=			OR	X86=		
L	FINST PRESE	MIATION OF MIC		ENDENT	CLAIIVI		+1	45=		OR	+290=		
								TOTAL		OR	TOTAL	·	
(Column 1) (Column 2) (Column 3)								T. FEE	,		ADDIT. FEE		
	`	CLAIMS		HIGH		1			ADDI .			ADDI	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	USLY	PRESENT EXTRA	R/	ATE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	#A		= .	XS	9=		OR	X\$18=		
	Independent	*	Minus	***		=	X4	3=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									UH			
	I the optoits and		45≔	·	OR	+290=							
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	TOTAL ADDIT, FEE		
		mber Previously Pa ber Previously Pai						_	propriate box				